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2665/

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Date: November 3, 2004

Customer No.: 23696

Attorney Docket No.: PA762C1 In Re Application of: Tao Chen et al.

Serial Number: 10/055,293 Filed: January 22, 2002 Examiner: P. Nguyen Group Art Unit: 2665 RECEIVED

NOV 1 0 2004

Dear Sir:

Technology Center 2600

Transmitted herewith for filing is a Response to Office Action in the above identified application.

CLAIMS Remaining After Amendment Remaining After Amendment Number Extra Previously Paid Claims Large Entity Fee Fee Paid	CLAIMS Remaining After Amendment Previously Paid Claims Large Entity Fee Fee Paid							
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Three Months \$980 \$0.00 TERMINAL DISCLAIMER \$110 \$0.00 *If the number in column a is less than 20, enter 0 in column c. **If the number in column a is less than 3, enter 0 in column c. *If the number in column a is less than 20, enter 0 in column c. *If the number in column a is less than 3, enter 0 in column c. *If the number in column a is less than 3, enter 0 in column c. *If the number in column a is less than 3, enter 0 in column c. *If the number in column a is less than 20, enter 0 in column c. *If the number in column a is less than 20, enter 0 in column c. *If the number in column a is less than 20, enter 0 in column c. *If the number in column a is less than 20, enter 0 in column c. *If the number in column a is less than 20, enter 0 in column c. *If the number in column a is less than 20, enter 0 in column c. *If the number in column a is less than 20, enter 0 in column c. *If the number in column a is less than 20, enter 0 in column c. *If the number in column a is less than 20, enter 0 in column c. *If the number in column a is less than 20, enter 0 in column c. *If the number in column a is less than 20, enter 0 in column c. *If the number in column a is less than 20, enter 0 in column c. *If the number in column a is less than 20, enter 0 in column c. *If the number in column a is less than 20, enter 0 in column c. *If the number in column a is less than 20, enter 0 in column c. *If the number in column a is less than 20, enter 0 in column c. *If the number in column a is less than 20, enter 0 in column a is less than 20, enter 0 in column a c. *If the number in column a is less than 20, enter 0 in column a is less than 20, on the in column and/or extension fees. *If the number in column a is less than 20, on the in column and/or extension fees. *If the number in column and/or	Three Months \$980 \$0.00 TERMINAL DISCLAIMER \$110 \$0.00 *If the number in column a is less than 20, enter 0 in column c. *If the number in column a is less than 3, enter 0 in column c. *If the number in column a is less than 3, enter 0 in column c. *If the number in column a is less than 3, enter 0 in column c. *If the number in column a is less than 20, enter 0 in column c. TOTAL FEE \$430.00 *If the number in column a is less than 20, enter 0 in column c. TOTAL FEE \$430.00 *If the number in column a is less than 20, enter 0 in column c. TOTAL FEE \$430.00 The Commissioner is hereby authorized to charge payment of any additional fees which may be required, or credidany overpayment to said Deposit Account No. 17-0026. A duplicate of this sheet is enclosed for fee processing. *If Commissioner is further hereby authorized to charge to said Deposit Account No. 17-0026, pursuant to 37 CFR 1.18 inclusive, for the entire pendency of this application without specific additional authorization. Date: November 3, 2004 Signature: *If Commissioner is the feet of the entire pendency of this application without specific additional authorization. *If Commissioner is further hereby authorized to charge to said Deposit Account No. 17-0026, pursuant to 37 CFR 1.18 inclusive, for the entire pendency of this application without specific additional authorization. *If Commissioner is further hereby authorized to charge to said Deposit Account No. 17-0026, pursuant to 37 CFR 1.18 (a) To 37 CFR 1.16 (a) To 37 CFR 1.8(a) *If Commissioner is further hereby authorized to charge to said Deposit Account No. 17-0026, pursuant to 37 CFR 1.16 (a) To 37 C			O	ne Month	\$110	\$0.00	
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**If the number in column a is less than 3, enter 0 in column c. 4. Fee check in the amount of is enclosed to pay for any claim and/or extension fees. 5. Please charge Deposit Account No. 17-0026 of QUALCOMM Incorporated the amount of \$430.00. The Commissioner is hereby authorized to charge payment of any additional fees which may be required, or credit any overpayment to said Deposit Account No. 17-0026. A duplicate of this sheet is enclosed for fee processing. 6. The Commissioner is further hereby authorized to charge to said Deposit Account No. 17-0026, pursuant to 37 CFR 1.25(b), any fee whatsoever which may become properly due or payable, as set forth in 37 CFR 1.16 to 37 CFR 1.18 inclusive, for the entire pendency of this application without specific additional authorization. Date: November 3, 2004 Signature: S. Hossain Beladi, Reg. No. 42,311 QUALCOMM Incorporated Attn: Patent Department 5775 Morehouse Drive San Diego, California 92121-1714 Telephone: (858) 658-5787	**If the number in column a is less than 3, enter 0 in column c. 4. Fee check in the amount of \$ is enclosed to pay for any claim and/or extension fees. 5. Please charge Deposit Account No. 17-0026 of QUALCOMM Incorporated the amount of \$430.00. The Commissioner is hereby authorized to charge payment of any additional fees which may be required, or credi any overpayment to said Deposit Account No. 17-0026. A duplicate of this sheet is enclosed for fee processing. 6. The Commissioner is further hereby authorized to charge to said Deposit Account No. 17-0026, pursuant to 37 CFR 1.25(b), any fee whatsoever which may become properly due or payable, as set forth in 37 CFR 1.16 to 37 CFR 1.18 inclusive, for the entire pendency of this application without specific additional authorization. Date: November 3, 2004 QUALCOMM Incorporated Attn: Patent Department 5775 Morehouse Drive San Diego, California 92121-1714 Telephone: (858) 658-5787 Facsimile: (858) 658-2502 CERTIFICATE OF MAILING/TRANSMISSION (37 CFR 1.8(a)) I hereby certify that this correspondence is, on the date shown below, being: MAILING FACSIMILE deposited with the United States Postal Service with sufficient postage as first class mail, in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. Depositor's Name: Depositor's Name: Depositor's Name:		TERMINAL	DISCLAIMER		\$110	\$0.00	
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	deposited with the United States Postal Service with sufficient postage as first class mail, in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. It transmitted by facsimile to the Patent and Trademark Office. Depositor's Name:	I hereby certify th	at this corresponde	nce is, on the date s	hown below, bein	g:		
I hereby certify that this correspondence is, on the date shown below, being:	with sufficient postage as first class mail, in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. Depositor's Name:		MAILING			FACSIMILE		
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MAILING ✓ deposited with the United States Postal Service with sufficient postage as first class mail, in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313- FACSIMILE transmitted by facsimile to the Patent and Trademark Office.			· Sheryl Schoen		Depositor 5 P			